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PTC/SS/22 (08-03)

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U.S. Palant and Tradsheart Office U.S. DEPARTMENT OF COMMERCE
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			
		In re Application of Neal Kenn	neth Jacobe et al.
		Application Number 10/611,69	
		For ELECTRONIC DEVICE LIGHTING LIGHT PIPE	REMOTE CONTROL KEYPAD BACK
		Art Unit 2875 Examine	r Jason Han
This is a identified	request under the provisions of epplication.	37 CFR 1.136(a) to extend the	period for filing a reply in the above
The requ	ested extension and appropriate	e non-small-entity fee are as foll	lows (check time period desired):
	One month (37 CFR 1	.17(a)(1))	the (allege allege):
	Two months (37 CFR		•
	Three months (37 CFF		\$
	Four months (37 CFR		\$ <u>1020</u>
	Five months (37 CFR	1 17/01/51	\$
	Applicant claims small entity	table. See 27.0571 4	<b>s</b>
	above is reduced by one-half, A check in the amount of the	tatus. See 37 CFR 1.27. There and the resulting fee Is: \$	ofore, the fee amount shown FEL ON
	Payment by credit card. Form		,
	The Director has already been authorized to charge fees in this application to a Deposit Account.		
Ø	The Director is hereby authors	zed to charge any fees which ma	ou be evening a
l am	the applicant/inventor.	py or this snept.	
		of the entire Interest. See 37 CF	FR 3 71
	Statement under	37 CFR 3.73(b) is enclosed. (F	Form PTO/Spinal
. attorney or agent of recor		record. Registration Number_	Sum Ficasbies.
	attorney or agent un	nder 37 CFR 1,34(a).	
	Registration number	Wacting under 37 CFR 1.34(a). 42,201	
WAR			
_	February 14, 2005	A	diese I Day
	Date	الماركي الماركي	Signature (
_	Telephone Musel		Patricia A. Verlangleri
	Telephone Number	<del></del>	Typed or printed name
OTE: Signat	area of all the inventors of estignees of a	ecord of the entire tribarest or their repres	contradive(s) are required. Submit multiple forms if
			retain a benefit by the public which is to the (and by the

milesioner for Petents, P.O. Box 1450, Alexandria, VA 22318-1450. DO NOT SEND PEES OR COMPLETED PORMS TO THIS If you need assistance in completing the form, call 1-800-PTO-9169 and select option 2.

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PAGE 5/20 \* RCVD AT 4/25/2005 5:45:39 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-1/2 \* DNIS:8729306 \* CSID:609 734 6888 \* DURATION (mm-ss):05-46

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 101 611692 Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS minus 20 = OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 X S OR = MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR = \* If the difference in column 1 is less than zero, enter "0" in column 2. **TOTAL** OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR 4.25.05 (Column 3) (Column 2) (Column 1) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST ⋖ PRESENT REMAINING NUMBER RATE ADDI-RATE ENT **EXTRA** AFTER **PREVIOUSLY** TIONAL TIONAL AMENDMENT PAID FOR EEE FEE ENDMI Total (37 CFR 1.16(c)) Minus 20 × \$25= 20 x \$ 50 Independent (37 CFR 1.16(b)) Minus 2 x s 200 = x \$ 100= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + \$ 360= + s 180 = OR TOTAL TOTAL ADD'L FEE OR ADD'I FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST  $\omega$ PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-ENT AFTER AMENDMENT PREVIOUSLY PAID FOR **EXTRA** TIONAL TIONAL FEE FEE Total (37 CFR 1.16(c)) Minus AMENDM x s<u>ವರ</u> = x \$50 = OR Independent (37 CFR 1.16(b)) Minus x \$ /00 = x s <u>200</u>= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + =360 = + s 180 = OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST  $\circ$ PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-EN **AFTER PREVIOUSLY** FXTRA TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus ENDMI  $\times$  s25 = x s<u> 50</u> = OR Independent (37 CFR 1.16(b)) Minus = 200= x \$ 100 = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + \$360 = + \$ 180= OΒ TOTAL TOTAL ADD'L FEE ADD'L FEE OR \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.